# Case 22-10566-VFP Doc 22 Filed 03/25/22 Entered 03/25/22 13:45:51 Desc Main Document Page 1 of 60

Fill in this information t	o identify your case:		
United States Bankruptcy	/ Court for the:		
DISTRICT OF NEW JER	SEY		
Case number (if known)	22-10566	Chapter you are filing under:	
		☐ Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		■ Chapter 13	■ Check if this is an amended filing

#### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself			
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
Your full name			
Write the name that is on your government-issued picture identification (for	Mona First name	First name	
license or passport).	Middle name	Middle name	
identification to your meeting with the trustee.	Holland Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
All other names you have used in the last 8 years			
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7869		
	Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Holland Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 1:  Mona  First name  Holland Last name and Suffix (Sr., Jr., II, III)	About Debtor 1:  About Debtor 2 (Spouse Only in a Joint Case):  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Holland Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 2 (Spouse Only in a Joint Case):  Mindal First name  First name  Middle name  Last name and Suffix (Sr., Jr., II, III)  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years  Include your married or maiden names.

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live	EE Whittleggy Ave	If Debtor 2 lives at a different address:
		55 Whittlesey Ave. East Orange, NJ 07018	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Essex	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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ar	Tell the Court About	our Bar	nkruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Cha	pter 7						
		☐ Cha	pter 11						
		☐ Cha	pter 12						
		■ Cha	pter 13						
3.	How you will pay the fee	a o	bout how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself, y	ou may pay with cash	, cashier's check, or money	
				the fee in installments. If you in Installments (Official Form		e this option, sign	and attach the Applica	ation for Individuals to Pay	
				that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that					
				uired to, waive your fee, and r ır family size and you are una					
				n to Have the Chapter 7 Filin					
).	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.							
	·		District	District of New Jersey	When	8/07/18	Case number	18-25769	
			District	District of New Jersey	When	3/31/15	Case number	15-15807	
			District	<u> </u>	When	0,01,10	Case number		
					_				
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor				Relationship to y	ou ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	ou	
			District		_ When		Case number, if	known	
11.	Do you rent your	■ No.	Go to li	ne 12.					
	residence?	☐ Yes.	Has vo	ur landlord obtained an eviction	on iudam	ent against vou?			
		பரes.		No. Go to line 12.	on jaagiii	o againot you:			
				Yes. Fill out <i>Initial Statement</i>	About a	Eviction Judamo	nt Against Vou (Form	101Δ) and file it as part of	
				this bankruptcy petition.	ADUUL AI	r Evicuori Juagine	ni Agamsi 100 (FUIII	TOTA) and the it as part of	

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Part	Report About Any Bu	ısinesses	You Owr	n as a Sole Proprieto	r
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busir	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	& ZIP Code
	it to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as det	ined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small busines you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedures \$ 1116(1)(B).			
	For a definition of small	■ No.	I am ı	not filing under Chapte	er 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ubchapter V of Chapter 11.
Part	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?	
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number, Street, City, State & Zip Code
					number, Street, City, State a Zip Code

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Debtor 1 Mona Holland Case number (if known) 22-10566

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Mona Holland				Case number (if known)	22-10566		
Part	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.		ily consumer debts? Consume personal, family, or household		J.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts y	you owe that are not consumer of	debts or business debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Cha	apter 7. Go to line 18.				
	Do you estimate that after any exempt	☐ Yes.		er 7. Do you estimate that after a be available to distribute to unse		uded and administrative expenses		
	property is excluded and administrative expenses		□ No					
	are paid that funds will be available for		□ Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1	20	□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000	□ 50	5,001-50,000 0,001-100,000 lore than100,000		
		☐ 200-9	· ·	:0,00: 20,000				
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10		500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$5		1,000,000,001 - \$10 billion		
		. ,	001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$1 □ \$100,000,001 - \$		10,000,000,001 - \$50 billion lore than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10	0 million	500,000,001 - \$1 billion		
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$5		\$1,000,000,001 - \$10 billion		
		_	001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$ <sup>-</sup> □ \$100,000,001 - \$	_	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have ex	amined this petition, and	I declare under penalty of perju	iry that the information prov	vided is true and correct.		
				oter 7, I am aware that I may pro the relief available under each of				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupto and 3571	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		Mona H	a Holland olland	Sig	gnature of Debtor 2			
		Signature	of Debtor 1	, and the second				
		Executed	on <b>March 25, 2022</b>	Exe	ecuted on			
			MM / DD / YYYY		MM / DD / YY	YY		

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Debtor 1 Mona Holland Case number (if known) 22-10566

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scott D	. Sherman	Date	March 25, 2022
Signature of	Attorney for Debtor		MM / DD / YYYY
Scott D. S	herman		
Printed name			
MINION &	SHERMAN		
Firm name			
33 Clinton	Road		
Suite 105			
<b>West Cald</b>	well, NJ 07006		
Number, Street,	City, State & ZIP Code		
Contact phone	(973) 882-2424	Email address	ssherman@minionsherman.com
NJ			
Bar number & St	tate		

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Fill in this information to identify your case:					
Mona Holland					
First Name	Middle Name	Last Name			
First Name	Middle Name	Last Name			
uptcy Court for the:	DISTRICT OF NEW JERSEY				
10566					
_	First Name	First Name Middle Name  First Name Middle Name  ruptcy Court for the: DISTRICT OF NEW JERSEY			

■ Check if this is an amended filing

12/15

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

info	ns complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend roriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	307,200.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,954.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	316,154.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	538,510.94
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	31,775.00
	Your total liabilities	\$	570,285.94
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,030.78
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,892.22
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s box and s	ubmit this form to

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8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\_2,559.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Debt	or 1	Mona Holland					
Debt	or 2	First Name	Middle	Name	Last Name		
	se, if filing)	First Name	Middle	Name	Last Name		
Unite	d States E	Bankruptcy Court for t	he: DISTRICT	OF NE	W JERSEY		
Case	number	22-10566					Check if this is an amended filing
Off	cial F	orm 106A/B					
		ile A/B: Pr	operty				12/15
Part 1. Do	er every qu	ore space is needed, at estion. De Each Residence, Bui r have any legal or equ	ttach a separate sh	heet to t	married people are filing together, both are his form. On the top of any additional pages  I Estate You Own or Have an Interest In dence, building, land, or similar property?		
1.1		e is the property?		What	t is the property? Check all that apply  Single-family home	Do not deduct secured cl	aims or exemptions. Put
_	Street addres	ss, if available, or other descr	ription		Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clai	d claims on Schedule D:
	East Ora	ange NJ	07018-0000			Current value of the entire property?	Current value of the portion you own?
-	City	State	ZIP Code	Uho	Timeshare Other has an interest in the property? Check one	\$307,200.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Fee simple	\$307,200.00 your ownership interest ancy by the entireties, or
_	County				200.0.2 0,		
				☐ Othe		Check if this is con (see instructions) m, such as local	nmunity property
					your entries from Part 1, including any		\$307,200.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

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Debto	or 1 Mona Hollan	d Case number (if know	n) <b>22-10566</b>
		or homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
	No		
	Yes		
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=>	\$0.00
		nal and Household Items	
Do y	ou own or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
E>	usehold goods and for examples: Major applian No Yes. Describe	urnishings ces, furniture, linens, china, kitchenware	
		Ondinger Francisco	\$2.000.00
		Ordinary Furniture	\$2,000.00
E)		nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music phones, cameras, media players, games	c collections; electronic devices
		TV, Cell Phone	\$1,000.00
<i>E</i> > ■ □ 9. <b>Eq</b>	other collection No Yes. Describe uipment for sports are xamples: Sports, photo	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe	
_	musical instru No Yes. Describe	iments	
E	<b>irearms</b> Examples: Pistols, rifles No Yes. Describe	s, shotguns, ammunition, and related equipment	
	clothes Examples: Everyday clo No Yes. Describe	othes, furs, leather coats, designer wear, shoes, accessories	
_	res. Describe		
		Ordinary Clothing	\$200.00
	ewelry Examples: Everyday jev No Yes. Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems	s, gold, silver
		Misc. Jewelry	\$100.00
		mioo. comon y	ψ.50.00

Official Form 106A/B

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1 Mona Holland Case number (if known) 22-10566

Deb	otor 1	Mona Holland				Case number (if known)	22-10566
13	Non-far	rm animals					
		bles: Dogs, cats, birds	, hor	ses			
		Describe					
_	_	ner personal and ho	usel	nold items you d	lid not already list, including	g any health aids you did not list	
_	■ No □ Yes.	Give specific informa	tion.				
45	A .1.1.41	h - Jallan			. Bart O to alcalle a access and t		
15.			-		n Part 3, including any entrie	es for pages you have attached	\$3,300.00
Par	t 4: Des	scribe Your Financial A	ssot	•			
					t in any of the following?		Current value of the
	, c c						portion you own? Do not deduct secured claims or exemptions.
_	<b>Cash</b> <i>Examp</i> ☑ No	oles: Money you have	in yo	our wallet, in you	r home, in a safe deposit box,	and on hand when you file your peti	tion
ı	Yes						
						Pocket Money	\$5.00
_	□No	institutions. If you	ı hav	ve multiple accou	Institution name:  U.S. Direct Expre	ess	
		17	7.1.	Checking	(for social secur	ity deposits)	\$15.00
		17	7.2.	Checking	Valley National E	3ank	\$170.00
18.		mutual funds, or puoles: Bond funds, inve			s brokerage firms, money mark	et accounts	
	■ No □ Yes			Institution or issu	ıer name:		
	Non-pu joint ve □ No		and i	interests in inco	orporated and unincorporate	ed businesses, including an intere	st in an LLC, partnership, and
ı	Yes.	Give specific informa		about them ne of entity:		% of ownership:	
					ttlesey Ave., East Orango	e NJ	
			(so	le proprietor )		%	\$0.00
20	Govern	ment and corporate	hor	nde and other no	agotiable and non-nagotiable	a instruments	
_	Negotia	able instruments inclu	de p	ersonal checks,	egotiable and non-negotiable cashiers' checks, promissory of transfer to someone by signir	notes, and money orders.	
	☐ Yes. (	Give specific informat	ion a	about them			

Official Form 106A/B Schedule A/B: Property

page 3

Case 22-10566-VFP Doc 22 Filed 03/25/22 Entered 03/25/22 13:45:51 Desc Main

De	ebtor 1	Mona Hol	land	Docum	ent	Page 13	of 60	Case number (if known)	22-10	566
			Issuer name							
			issuei name.	•						
21.		ment or pens ples: Interests		n, 401(k), 403(b), th	rift saving	s accounts, o	r other pe	ension or profit-sharing	plans	
	☐ Yes.	List each acco	ount separately. Type of accoun	t: In	stitution n	ame:				
22.	Your s	share of all unu	nd prepayments used deposits you havents with landlords, pre					om a company ommunications compa	nies, or o	thers
	_			In	stitution n	ame or indivi	dual:			
23.	Annuit	ties (A contrac	ct for a periodic payme	ent of money to you,	, either foi	life or for a n	umber of	f years)		
	☐ Yes		Issuer name and des	scription.						
24.			ation IRA, in an acco 1), 529A(b), and 529(l		ABLE pro	ogram, or und	der a qua	alified state tuition pr	ogram.	
	☐ Yes		Institution name and	description. Separa	ately file th	ne records of	any intere	ests.11 U.S.C. § 521(c	):	
25.	Trusts	, equitable or	future interests in p	property (other that	n anythin	g listed in lir	ne 1), and	d rights or powers ex	ercisable	for your benefit
	☐ Yes.	Give specific	information about the	em						
26.			s, trademarks, trade s domain names, websit				agreemer	nts		
		Give specific	information about the	em						
27.			es, and other general permits, exclusive lice		associatio	n holdings, liq	uor licens	ses, professional licen	ses	
		Give specific	information about the	em						
M	oney or	property owe	ed to you?						ро	rrent value of the rtion you own?
									cla	ims or exemptions.
	Tax ref	funds owed t	o you							
	■ Yes.	Give specific	information about the	m, including whethe	er you alre	ady filed the r	eturns ar	nd the tax years		
			Г					$\neg$		
				2021 1040 Taxes	3			Federal		\$4,000.00
29.	Exam <sub>l</sub> ■ No		or lump sum alimony	, spousal support, c	child suppo	ort, maintenar	nce, divor	rce settlement, propert	y settleme	ent
30.		<i>ples:</i> Unpaid w	neone owes you vages, disability insura unpaid loans you ma			efits, sick pay	, vacatior	n pay, workers' compe	ensation,	Social Security

☐ Yes. Give specific information..

Case 22-10566-VFP Doc 22 Filed 03/25/22 Entered 03/25/22 13:45:51 Desc Main Document Page 14 of 60

Debtor 1 Mona Holland Case number (if known) 22-10566

31.	Interests in insurance policies  Examples: Health, disability, or life in  No	nsurance; health savings account (I	HSA); credit, homeowner's, or renter's insura	nce
	☐ Yes. Name the insurance company Compa	of each policy and list its value. ny name:	Beneficiary:	Surrender or refund value:
	Any interest in property that is due If you are the beneficiary of a living t someone has died.  ■ No □ Yes. Give specific information		od surance policy, or are currently entitled to rec	eive property because
33.	Claims against third parties, wheth Examples: Accidents, employment of No  ■ Yes. Describe each claim			
		Claim against company that house from foreclosure.	at claimed to assist with saving	\$1,464.00
	Other contingent and unliquidated ■ No □ Yes. Describe each claim	claims of every nature, including	g counterclaims of the debtor and rights to	o set off claims
	Any financial assets you did not al ■ No □ Yes. Give specific information	ready list		
36	. Add the dollar value of all of your for Part 4. Write that number here		ny entries for pages you have attached	\$5,654.00
Pa	rt 5: Describe Any Business-Related Pr	operty You Own or Have an Interest I	n. List any real estate in Part 1.	
	Do you own or have any legal or equital  No. Go to Part 6.  Yes. Go to line 38.	ole interest in any business-related pr	roperty?	
Pa	rt 6: Describe Any Farm- and Commerc If you own or have an interest in farm		n or Have an Interest In.	
46.	Do you own or have any legal or ed ■ No. Go to Part 7. □ Yes. Go to line 47.	quitable interest in any farm- or c	commercial fishing-related property?	
Pa	rt 7: Describe All Property You Ow	n or Have an Interest in That You Did	l Not List Above	
53.	Do you have other property of any Examples: Season tickets, country o			
	☐ Yes. Give specific information			
54	. Add the dollar value of all of your	entries from Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

# Case 22-10566-VFP Doc 22 Filed 03/25/22 Entered 03/25/22 13:45:51 Desc Mair Document Page 15 of 60

Case number (if known) 22-10566 Debtor 1 Mona Holland Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 55. \$307,200.00 Part 2: Total vehicles, line 5 56. \$0.00 Part 3: Total personal and household items, line 15 57. \$3,300.00 Part 4: Total financial assets, line 36 58. \$5,654.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$8,954.00 \$8,954.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$316,154.00

Official Form 106A/B Schedule A/B: Property page 6

## Case 22-10566-VFP Doc 22 Filed 03/25/22 Entered 03/25/22 13:45:51 Desc Main Document Page 16 of 60

Fill in this information to identify your case:						
Debtor 1	Mona Holland					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY				
Case number	22-10566					

Check if this is an amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/E	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	Ordinary Furniture Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)					
	Line from Scriedule A/B: 0.1			100% of fair market value, up to any applicable statutory limit						
	TV, Cell Phone Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)					
	Line from Scriedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	Ordinary Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)					
	Line IIIIII Scriedale PAB. 11.1			100% of fair market value, up to any applicable statutory limit						
	Misc. Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)					
	Line Holli Schedule PAB. 12.1			100% of fair market value, up to any applicable statutory limit						
	Pocket Money Line from Schedule A/B: 16.1	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)					
	Line Irom Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit						

# Case 22-10566-VFP Doc 22 Filed 03/25/22 Entered 03/25/22 13:45:51 Desc Main Document Page 17 of 60

ре	iviona nollano			Case number (ii known)	22-10300			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	Checking: U.S. Direct Express (for social security deposits)	\$15.00		\$15.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit				
	Checking: Valley National Bank Line from Schedule A/B: 17.2	\$170.00 <b>■</b>		\$170.00	11 U.S.C. § 522(d)(5)			
	Line Ironi Schedule PVB. 11.2			100% of fair market value, up to any applicable statutory limit				
	Federal: 2021 1040 Taxes Line from Schedule A/B: 28.1	\$4,000.00		\$4,000.00	11 U.S.C. § 522(d)(5)			
	Line Holli Schedule AVB. 20.1			100% of fair market value, up to any applicable statutory limit				
	Claim against company that claimed to assist with saving house from	\$1,464.00		\$1,464.00	11 U.S.C. § 522(d)(5)			
	foreclosure. Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)  No							
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?			
	□ No □ Yes							
	II YAS							

#### Eilad 03/25/22 Entered 03/25/22 13:45:51 Casa 22-10566-V/ED

Case 22-10300-VFF	Doc 22 Filed 03/23/2  Document F	Page 18	of 60	13.43.31 Des	Civialii
Fill in this information to identify you		.,			
Debtor 1 Mona Holland					
First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number 22-10566 (if known)					if this is an led filing
Official Form 106D Schedule D: Creditors	Who Have Claims S	ecured	by Property	/	12/15
Be as complete and accurate as possible. I s needed, copy the Additional Page, fill it c number (if known).					
1. Do any creditors have claims secured by	your property?				
☐ No. Check this box and submit the	nis form to the court with your other so	chedules. You	u have nothing else to	report on this form.	
■ Yes. Fill in all of the information b	pelow.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has n for each claim. If more than one creditor has much as possible, list the claims in alphabetic	a particular claim, list the other creditors in		Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 NewRez LLC d/b/a Shellpoint Mortgage	Describe the property that secures the	e claim:	\$538,510.94	\$307,200.00	\$231,310.94
Creditor's Name	55 Whittlesey Avenue East Or NJ 07018 Essex County				<u> </u>
PO Box 10826		a alcall that			
Greenville, SC 29603-0826	As of the date you file, the claim is: Ch apply.	neck all that			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mo	ortgage or secu	red		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mecha ☐ Judgment lien from a lawsuit	anic's lien)			
☐ Check if this claim relates to a community debt	•	irst Mortga	ge		
Opened 9/01/03 Last Active 1/07/15	Last 4 digits of account numbe	4323			
Add the dollar value of your entries in Co	olumn A on this page. Write that numbe	er here:	\$538,51	0 94	
If this is the last page of your form, add the Write that number here:			\$538,51		
Part 2: List Others to Be Notified for	r a Debt That You Already Listed				

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

]	Name, Number, Street, City, State & Zip Code Ditech Financial LLC PO Box 6172
	Rapid City, SD 57709-6172

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number \_\_\_\_

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Debtor	Mona Holland			Case number (if known)	22-10566	
	First Name	Middle Name	Last Name			
	KML Law Grou	NY Mellon Independence et		On which line in Part 1 did you ent  Last 4 digits of account number		
	Name, Number, Str KML Law Grou 216 Haddon A' Suite 406 Westmont, NJ	ve.		On which line in Part 1 did you ent  Last 4 digits of account number		
				On which line in Part 1 did you ent  Last 4 digits of account number	<del></del>	

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		Documer	it Page 20	0 01 60		
Fill in this	information to identify your	case:				
Debtor 1	Mona Holland					
Dobioi I	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, fil	ng) First Name	Middle Name	Last Name			
United Sta	ites Bankruptcy Court for the:	DISTRICT OF NEW JER	SEY			
Case num	ber <b>22-10566</b>					
(if known)	<u> </u>				■ Check	if this is an
					ameno	ded filing
⊃4:-:-I	Γο.::::: 4.00Γ/Γ					
	Form 106E/F	lha Haya Haaay	red Cleime			40/4E
	ule E/F: Creditors W					12/15
Schedule D eft. Attach name and c	: Executory Contracts and Unexp : Creditors Who Have Claims Sec the Continuation Page to this pag ase number (if known).	ured by Property. If more spage. If you have no information	ace is needed, copy	the Part you need, fill it out	t, number the entries i	in the boxes on the
Part 1:	List All of Your PRIORITY Ur					
_ `	creditors have priority unsecure	d claims against you?				
	Go to Part 2.					
☐ Yes						
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any	creditors have nonpriority unsec	cured claims against you?				
□ No.	You have nothing to report in this p	art. Submit this form to the cou	rt with your other sche	edules.		
■ Yes						
	of your nonpriority unsecured cl	aims in the alphahetical orde	or of the creditor who	holds each claim. If a cred	litor has more than one	nonpriority
unsecu	red claim, list the creditor separatel le creditor holds a particular claim, l	y for each claim. For each clain	n listed, identify what t	ype of claim it is. Do not list of	claims already included	in Part 1. If more
r art 2.					Total	al claim
4.1 <b>A</b>	ffinity Fcu	Last 4 digits	of account number	3866		\$0.00
No	onpriority Creditor's Name					
	B Mountainview Blvd Bld asking Ridge, NJ 07920	When was th	e debt incurred?	Opened 01/18 Last 3/30/18	Active	
No	umber Street City State Zip Code		e you file, the claim	s: Check all that apply		
	ho incurred the debt? Check one.					
	Debtor 1 only	☐ Contingen				
	Debtor 2 only	☐ Unliquidate	ed			
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and an		PRIORITY unsecure	d claim:		
	Check if this claim is for a com					
	bt the claim subject to offset?	☐ Obligation report as prior		ration agreement or divorce	that you did not	
	No.		•	g plans, and other similar de	hts	

☐ Yes

■ Other. Specify Credit Card

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Debtor 1 Mona Holland Case number (if known) 22-10566 4.2 \$689.00 Capital One Last 4 digits of account number 9594 Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/15 Last Active Po Box 30285 When was the debt incurred? 3/28/18 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **Capital One** 4.3 Last 4 digits of account number 0541 \$708.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 09/15 Last Active Po Box 30285 When was the debt incurred? 8/01/18 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Credit Collection Services** Last 4 digits of account number 6519 \$327.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 07/19** 725 Canton St Norwood, MA 02062 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Liberty Mutual Ins. Co. ☐ Yes

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Mona Holland		Case number (if known) 22-10566	
Credit One Bank	Last 4 digits of account number	5947	\$396.00
Attn: Bankruptcy Department Po Box 98873	When was the debt incurred?	Opened 11/18 Last Active 11/04/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	7213	\$0.00
Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 11/17 Last Active 4/20/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
		aration agreement or divorce that you did not	
		ng plans, and other similar debts	
□Yes	Other Specify Credit Care	<u>i</u>	
Diversified Consultants, Inc.	Last 4 digits of account number	8179	\$0.00
Nonpriority Creditor's Name Diversified Consultants, Inc. Po Box 551268	When was the debt incurred?	Opened 2/06/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	<b>,</b>	, and apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only			
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
		aration agreement or divorce that you did not	
_	<u></u>	ng plans, and other similar debts	
☐ Yes			
	Credit One Bank  Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873  Las Vegas, NV 89193  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Discover Financial Nonpriority Creditor's Name Po Box 3025 New Albany, OH 43054  Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Diversified Consultants, Inc. Nonpriority Creditor's Name Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255  Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another	Credit One Bank Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Discover Financial Nonpriority Creditor's Name Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 onsultants, Inc. Nonpriority Creditor's Name Diversified Consultants, Inc. Nonpriority Creditor's Name Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255 Number Street City State Zip Code Who incurred the debt? Check one.  Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255 Number Street City State Zip Code Who incurred the debt? Check one. Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 NonPRIORITY unsecure Student loans Diversified Consultants, Inc. Po Box 551268 Jacksonville, FL 32255 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 NonPRIORITY unsecure Student loans Debtor 6 only Debtor 7 only Debtor 8 only 10 Unliquidated Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only 10 Unliquidated Debtor 5 only 10 Unliquidated Debtor 6 only 10 U	Last 4 digits of account number   S947   Speed   S947   S947   Speed   S947   Speed   S947   S947

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Case number (if known) 22-10566

Deblo	Mona Holland							
4.8	MUE Construction	Last 4 digits of account number		\$0.00				
	Nonpriority Creditor's Name 70 Forest Street Kearny, NJ 07032	When was the debt incurred?						
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	-	,					
	Debtor 1 only	Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	Is the claim subject to offset?  ☐ No	Debts to pension or profit-sharin	a plans, and other similar debts					
	■ Yes	Other. Specify For Notice						
	— 1es	- Other. Specify						
4.9	PSE&G	Last 4 digits of account number		\$24,524.00				
	Nonpriority Creditor's Name	When we do						
	P.O. Box 14444 New Brunswick, NJ 08906	When was the debt incurred?						
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	,,,,,,	or o					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured						
	☐ Check if this claim is for a community	☐ Student loans						
	debt	Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify						
4.1								
0	Thrift Investment Corp	Last 4 digits of account number	2701	\$4,807.00				
	Nonpriority Creditor's Name		Opened 03/18 Last Active					
	720 King George Post Rd Fords, NJ 08863	When was the debt incurred?	3/31/18					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured						
	☐ Check if this claim is for a community	Student loans						
	debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharin						
	☐ Yes	■ Other. Specify Automobile - Guarantor on Vehicle						

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Debtor	<sup>1</sup> Mona Holl	and		Case no	umber (if known)	22-10566	
4.1 1	Verizon		Last 4 digits of account number	0001			\$0.00
	500 Technol	tor's Name eless Bk Admin ogy Dr Ste 550 ngs, MO 63304	When was the debt incurred?	Oper 4/10/	ned 09/15 Las 118	t Active	
		ity State Zip Code	As of the date you file, the claim	is: Check	call that apply		
	Who incurred th	ne debt? Check one.					
	■ Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and	Debtor 2 only	☐ Disputed				
	☐ At least one of	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this	claim is for a community	☐ Student loans				
	debt Is the claim sub	-	Obligations arising out of a separeport as priority claims	aration ag	reement or divorce	that you did not	
	■ No		☐ Debts to pension or profit-sharing	ng plans,	and other similar de	ebts	
	☐ Yes		Other. Specify Agriculture	)			
4.1	Verizon		Last 4 digits of account number	0001		_	\$324.00
	500 Technol	tors Name eless Bk Admin ogy Dr Ste 550 ngs, MO 63304	When was the debt incurred?	Oper 6/02/	ned 11/09/15 L 116	ast Active	
	Number Street C	ity State Zip Code ne debt? Check one.	As of the date you file, the claim	is: Check	call that apply		
	■ Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and		□ Disputed				
	☐ At least one of	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this	claim is for a community	☐ Student loans				
	debt	-	Obligations arising out of a sepa	aration ag	reement or divorce	that you did not	
	Is the claim sub	ject to offset?	report as priority claims				
	■ No		Debts to pension or profit-sharing	•	and other similar de	ebts	
	Yes		Other. Specify Agriculture	)			
Part 3:		to Be Notified About a Deb	•				
is tryii have r	ng to collect from	n you for a debt you owe to sor	out your bankruptcy, for a debt that y neone else, list the original creditor ir you listed in Parts 1 or 2, list the addi submit this page.	Parts 1	or 2, then list the	collection agency l	nere. Similarly, if you
	nd Address		On which entry in Part 1 or Part 2 did you	list the o	original creditor?		
PSE&	_	L				ity Unsecured Claim	
-	ox 490 ord, NJ 07016	•	•	Part 2:	Creditors with Nonr	priority Unsecured C	aims
Oranic	, NO 07010		ast 4 digits of account number				
Part 4:	Add the Am	ounts for Each Type of Un	secured Claim				
	the amounts of c f unsecured clair		ns. This information is for statistical r	eporting	purposes only. 28	3 U.S.C. §159. Add	the amounts for each
					Total	Claim	
_	6a.	Domestic support obligations		6a.	\$	0.00	
Total claims							
from Pa	<b>rt 1</b> 6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00	
		•	njury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	ecured claims. Write that amount here.	6d.	\$	0.00	

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1 Mona Holland Case number (if known) 22-10566

Debtor 1 _N	lona Hol	land		umber (if kno	ewn) <u>22-10566</u>
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Γotal	6f.	Student loans	6f.	\$	Total Claim 0.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,775.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	31,775.00

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Fill in this information to identify your case:									
Debtor 1	Mona Holland								
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY							
Case number	22-10566								
(ii kilowii)									

Check if this is an amended filing

#### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

1	Person or	company with Name, Number,	whom you have th , Street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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		Documer	<u>nt Page 27 of 6</u>	50	
Fill in thi	is information to identify your	case:			
Debtor 1	Mona Holland				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	DISTRICT OF NEW JER	RSEY		
Case nun	mber <b>22-10566</b>				
(ii kilowil)				■ Check if this is ar amended filing	n
				amended ming	
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors		1	2/15
fill it out, your nam 1. Do	and number the entries in the e and case number (if known) o you have any codebtors? (If you	boxes on the left. Attach . Answer every question.	the Additional Page to t	n. If more space is needed, copy the Additional his page. On the top of any Additional Pages, value a codebtor.	
□ No ■ Ye					
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,			(Community property states and territories includ- ton, and Wisconsin.)	е
■ No	o. Go to line 3.				
☐ Ye	es. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in lin Form	ne 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make sui	your spouse is filing with you. List the person re you have listed the creditor on Schedule D ( 3). Use Schedule D, Schedule E/F, or Schedule	(Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	e debt
3.1	Kha-Ris Salaam			☐ Schedule D, line	
	55 Whittlesey Avenue East Orange, NJ 07018			■ Schedule E/F, line4.10	
	East Orallye, NJ 0/010			☐ Schedule G	
				I DEITT INVOSTMONT L'ALA	

Schedule H: Your Codebtors

Eill	in this informa	tion to identify your ca	200:					ı						
	otor 1	Mona Hollar												
	otor 2 use, if filing)						_							
Uni	ted States Bar	nkruptcy Court for the	: DISTRICT OF NEW J	ERSEY										
	se number	22-10566		-					eck if this i					
(										nen	t show	ing postpetit		r
Of	fficial Fo	rm 106l							MM / DD/			3		
So	chedule	I: Your Inc	ome						IVIIVI / DD/				12	<u>/15</u>
spoi	use. If you are ch a separate	e separated and you	are married and not filii r spouse is not filing wi On the top of any additi	ith you, do	not include i	nforn	nati	on abo	ut your sp	oou	se. If r	nore space	is needec	
1.	Fill in your e information	employment		Debtor 1					Debtor	2 0	or non-	-filing spous	se	
		If you have more than one job,	Employment status	■ Emplo	oyed				☐ Emp	oloy	ed			
	attach a separate page with information about additional	zmproyment status	☐ Not er	mployed				☐ Not	em	ployed				
		employers.	Occupation	Caretak	Caretaker for Disabled Son State of New Jersey									
	self-employe	time, seasonal, or ed work.	Employer's name	State of										
		may include student er, if it applies.	Employer's address		tlesey Ave. ange, NJ 07									
			How long employed to	here?	Since Dec 2019	emb	er 1	,						
Par	t 2: Giv	e Details About Mor	nthly Income											
		vincome as of the da	ate you file this form. If	you have no	othing to repo	rt for a	any	line, wı	ite \$0 in th	e s	pace. I	nclude your	non-filing	
		filing spouse have monage filing spouse have monage file.	ore than one employer, co	ombine the i	information fo	r all e	mple	oyers f	or that pers	son	on the	lines below.	If you nee	∍d
								For D	ebtor 1			ebtor 2 or iling spouse	<b>;</b>	
2.			ry, and commissions (becalculate what the month)			2.	\$		2,010.67	_	\$	N/	<u>A</u>	
3.	Estimate an	d list monthly overt	ime pay.			3.	+\$		0.00	_	+\$	N/	<u>A</u>	
4.	Calculate g	ross Income. Add lir	ne 2 + line 3.			4.	\$	2,	010.67		\$_	N/A		

Deb	otor 1	Mona Holland	_		Case	number ( <i>if ki</i>	nown)	22-1	0566		
						Debtor 1		non	Debtor i-filing s	spouse	
	Cop	by line 4 here	4		\$_	2,010	).67	\$_		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions		a.	\$_		6.89	\$_		N/A	
	5b. 5c.	Mandatory contributions for retirement plans		b. c.	\$_ \$		0.00	\$_ \$		N/A	
	5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans		d.	\$ _		0.00	\$ 		N/A N/A	
	5e.	Insurance		e.	\$		0.00	\$_		N/A	
	5f.	Domestic support obligations	5	f.	\$	(	0.00	\$		N/A	
	5g.	Union dues		g.	\$_		0.00	\$_		N/A	
	5h.	Other deductions. Specify:	_	h.+	\$_		0.00			N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6		\$ _		6.89	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7		\$ _	1,983	3.78	\$_		N/A	
8.	8b. 8c. 8d. 8e. 8f.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Social Security for Dependent Son  Food Stamps Pension or retirement income	8 8 8 8	a. b. c. d. e. f.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	100 (714 808 425	0.00 0.00 0.00 0.00 1.00 3.00 0.00	\$ \$ \$\$ \$ \$		N/A N/A N/A N/A N/A	
	8h.	Other monthly income. Specify:	_ 8	h.+	\$	(	0.00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9		\$	2,047	7.00	\$_		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,030.78	+ \$		N/A	= \$	4,030.78
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.									
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not ecify:	dep			,		•		e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restree that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	4,030.78
										Combin	ed / income
13.	Do	you expect an increase or decrease within the year after you file this form No.	?								,
		Yes. Explain: Debtor has nominal income from Mo's Kitchen									

Official Form 106l Schedule I: Your Income page 2

Fill	in this inforn	nation to identify yo	our case:					
Deb (Spo	otor 1 otor 2 ouse, if filing) ed States Bar	Mona Hollan		CT OF NEW JERSEY		<b>■</b> ′	k if this is: An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
	e number	22-10566						
		orm 106J e <b>J: Your</b> I	Exper	ises				12/1
Be info	as completer	e and accurate as	possible.	If two married people and the control of the contro				or supplying correct
Par 1.	Is this a jo  ■ No. Go □ Yes. Do	to line 2.  ces Debtor 2 live i  No	in a separa	ate household? al Form 106J-2, <i>Expens</i> es	s for Separate House	ehold of Debt	or 2.	
2.	Do you ha	ave dependents?	□ No					
	•	Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not sta dependent				Son		43	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes
3.	expenses	xpenses include of people other the and your depender	han $_{f \Box}$	No Yes				☐ Yes
Est	imate your	f a date after the b	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		ich assistance and		government assistance i cluded it on Schedule I:			Your expe	enses
4.		I or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4. \$		1,708.89
	If not incl	uded in line 4:						
	4b. Prop 4c. Hom	al estate taxes perty, homeowner's ne maintenance, re neowner's associat	pair, and ι	ıpkeep expenses		4a. \$ 4b. \$ 4c. \$ 4d. \$		0.00 0.00 0.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

ebtor 1 N	Mona Holland	Case num	ber (if known)	22-10566
Utilities	s:			
	Electricity, heat, natural gas	6a.	\$	350.00
6b. V	Nater, sewer, garbage collection	6b.	\$	33.33
6c. T	Felephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d. C	Other. Specify:	6d.	\$	0.00
Food a	and housekeeping supplies	7.	\$	500.00
Childo	are and children's education costs	8.	\$	0.00
Clothir	ng, laundry, and dry cleaning	9.	\$	100.00
). Persor	nal care products and services	10.	\$	0.00
1. Medica	al and dental expenses	11.	\$	0.00
	portation. Include gas, maintenance, bus or train fare.			202.22
	include car payments.	12.	·	200.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
l. Charita	able contributions and religious donations	14.	\$	0.00
5. <b>Insura</b> i				
	include insurance deducted from your pay or included in lines 4 or 20.	150	Φ.	0.00
	ife insurance	15a. 15b.		0.00
	Health insurance		*	0.00
	/ehicle insurance	15c.	·	0.00
	Other insurance. Specify:	15d.	\$	0.00
Specify	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
7. Installr	ment or lease payments:	_	· —	
	Car payments for Vehicle 1	17a.	·	0.00
17b. (	Car payments for Vehicle 2	17b.	\$	0.00
17c. (	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report as	 18.	<b>c</b>	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
9. Other p Specify	payments you make to support others who do not live with you.	19.	Ф	0.00
	· real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i> c	-	ur Incomo	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20d. 20e.		
1. Other:			*	0.00
i. Other:	Specily.	21.	+ <b>⊅</b>	0.00
2. Calcula	ate your monthly expenses			
	dd lines 4 through 21.		\$	2,892.22
22b. Co	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Ac	dd line 22a and 22b. The result is your monthly expenses.		\$	2,892.22
3. Calcul	ate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,030.78
	Copy your monthly expenses from line 22c above.	23b.	·	2,892.22
			·	
	Subtract your monthly expenses from your monthly income.			4 400 50
T	The result is your monthly net income.	23c.	\$	1,138.56
For exar	a expect an increase or decrease in your expenses within the year after you mple, do you expect to finish paying for your car loan within the year or do you expect your ution to the terms of your mortgage?			ease or decrease because of
No.				

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Fill in this info	rmation to identify your	case:		
Debtor 1	Mona Holland	Middle Noor	Last Maria	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	22-10566			
(if known)				Check if this is an amended filing

#### Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
that they are true and correct.  X /s/ Mona Holland  Mona Holland	read the summary and schedules filed with this declaration and  X  Signature of Debtor 2
Signature of Debtor 1  Date March 25, 2022	Date

Debtor 1 Mona Holland  Past Name		to this total					
Debtor 2 (Sposse A, Illing)  First Nime  Models Raine  Last Name  Last Name  United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  Statement of Financial Affairs for Individuals Filling for Bankruptcy  4/15  8a as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  What is your current marital status?  Married  Not married  Not married  Not married  Dates Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   lived there  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  No  Yes. Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are liting a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Pettor 1  Sources of income Check all that apply.  Conuses, lips  Debtor 2  Pettor 3  Wages, commissions, bonuses, lips  Debtor 2  Wages, commissions, bonuses, lips	FIII	in this infor	mation to identify you	case:			
Debtor 2   Case number   22-10566     Check if this is an amended filling     Check if this apparent     Check if this apparent     Check if this is an amended filling     Check if this apparent     Check i	Del	btor 1		Middle Name	Last Name		
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  Case number 22-10566  (Il house)  Case acmplete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question.  Case acmplete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question.  Case number (If known). Answer every question.  Case acmplete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct norman and case number (If known). Answer every question.  Case acmplete and accurate as possible. If two married people are filling together, list it only once under now.  Case acmplete and accurate as possible. If two married people are filling a joint case and you have increased in the last 3 years. Do not include where you live now?  Case and the married people are filling a joint case and you have increased filling and and businesses, including part-time activities.  Case number (If known). Answer every question.  Case number (If known). Answer e	Del	btor 2	. not raine	made Name	<u> </u>		
Case number 22-10566  Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  FIGHT Give Details About Your Marital Status and Where You Lived Before  What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  Poetor 1 Prior Address:  Dates Debtor 1  Debtor 2 Prior Address:  Dates Debtor 1  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arzona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2  Explain the Sources of Your Income  Louis amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  Debtor 1  Sources of income Check all that apply.  Explain the details.  Debtor 1  Sources of income Check all that apply.  Explain the commissions, bonuses, tips  Weges, commissions, bonuses, tips	(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  Pes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:   Dates Debtor 2   lived there  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  Debtor 1   Sources of income (Defore deductions and exclusions)  Debtor 2   Sources of income (Defore deductions and exclusions)  Poblor 2   Sources of income (Defore deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips	Uni	ited States Ba	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  Pes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:   Dates Debtor 2   lived there    Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  Debtor 1  Sources of income (before deductions and exclusions)  Poetror 2  Sources of income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips	Ca	se number	22-10566				
Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/18 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Fort 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  Not married  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, Nev Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes, Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2  Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  Debtor 1  Sources of income Check all that apply.  Leftore deductions and exclusions)  Poblics 2  Sources of income (before deductions and exclusions)  Sources, tips	(if kr	_				<b>■</b> C	Check if this is an
Statement of Financial Affairs for Individuals Filing for Bankruptcy  3/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married   N						a	mended filing
Statement of Financial Affairs for Individuals Filing for Bankruptcy  3/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married   N							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before    What is your current marital status?   Married   Not married	Of	ficial Fo	rm 107				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before    What is your current marital status?   Married   Not married	St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 15   Give Details About Your Marital Status and Where You Lived Before	Be a	as complete	and accurate as possi	ble. If two married people a	are filing together, both are	equally responsible for sup	plying correct
Part 1: Give Details About Your Marital Status and Where You Lived Before    What is your current marital status?	info	rmation. If n	nore space is needed,	attach a separate sheet to			
What is your current marital status?   Married   Not married	nun	nber (If Know	n). Answer every que	stion.			
Married   Not married	Pa	rt 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Iived there  Debtor 2 Prior Address: Dates Debtor 2 Iived there  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Debtor 1 Sources and you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Check all that apply.  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  Sources, tips	1.	What is you	ır current marital statı	is?			
During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Iived there  Debtor 2 Prior Address: Dates Debtor 2 Iived there  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Debtor 1 Sources and you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Check all that apply.  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  Sources, tips		□ Married	1				
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Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 4   Debtor 5   Debtor 5   Debtor 6   Debtor 6   Debtor 6   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 7   Debtor 8   Debtor 9	۷.	During the	last 3 years, nave you	lived anywhere other than	where you live now?		
Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 5   Debtor 5   Debtor 6   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 7   Debtor 8   Debtor 9   Debto		■ No					
lived there		☐ Yes. Li	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filled for bankruptcy:  Wages, commissions, bonuses, tips		Debtor 1 P	rior Address:		Debtor 2 Prior Ad	dress:	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filled for bankruptcy:  Wages, commissions, bonuses, tips	3.	Within the I	ast 8 years, did you ev	ver live with a spouse or led	gal equivalent in a commun	ity property state or territory	? (Community property
Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips	stat						
Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips		■ No					
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Government year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips		_	ake sure you fill out Scl	nedule H: Your Codebtors (O	fficial Form 106H).		
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Government year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips							
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips	Pa	rt 2 Expla	in the Sources of You	r Income			
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$6,031.00  Wages, commissions, bonuses, tips	4.	Did you hav	e any income from en	nployment or from operatin	ng a business during this ye	ear or the two previous cale	ndar years?
□ No ■ Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 1 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Fond January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  □ Wages, commissions, bonuses, tips  □ Wages, commissions, bonuses, tips							
Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Wages, commissions, bonuses, tips		_	ng a joint oase and you	Thave income that you receive	o together, her it only office at	ider Bester 1.	
Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Food January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Debtor 2 Sources of income (before deductions and exclusions)  Under the date you filed for bankruptcy:							
Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Sources of income (before deductions and exclusions)  Under the date you filed for bankruptcy:		■ Yes. Fi	ll in the details.				
Check all that apply.  Check all that apply.  (before deductions and exclusions)  Check all that apply.  Check all that apply.  (before deductions and exclusions)  The date you filed for bankruptcy:  Check all that apply.  (before deductions and exclusions)  The date you filed for bankruptcy:  Check all that apply.  (before deductions and exclusions)  The date you filed for bankruptcy:				Debtor 1		Debtor 2	
From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  **G,031.00**  **G,031.00**  **G,031.00**  **Double to the date you filed for bankruptcy:  **Double to the date you							
the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Dispute the date you filed for bankruptcy:				опеск ан шагарру.		опсок ан шасарру.	•
the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Dispute the date you filed for bankruptcy:	Fro	m January 1	of current year until	Wages commissions	\$6.031.00	☐ Wages, commissions	
☐ Operating a business ☐ Operating a business				_	4-,	=	
				☐ Operating a business		☐ Operating a business	

Official Form 107

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		Debtor 1		Debtor 2			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
For last calendar ye (January 1 to Decen		■ Wages, commissions, bonuses, tips	\$904.00	☐ Wages, commissions, bonuses, tips			
		☐ Operating a business		☐ Operating a business			
		☐ Wages, commissions, bonuses, tips	\$14,791.00	☐ Wages, commissions, bonuses, tips			
		Operating a business		☐ Operating a business			
		■ Wages, commissions, bonuses, tips	\$24,172.00	☐ Wages, commissions, bonuses, tips			
		☐ Operating a business		☐ Operating a business			
winnings. If you a	are filing a joint cas	se and you have income that you	you received together, list it o	·	is gamoing and lottery		
		Debtor 1		Debtor 2			
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:		Social Security Benefits	\$4,248.75				
For last calendar ye (January 1 to Decen		Social Security Benefits	\$6,852.00				
For the calendar year before that: (January 1 to December 31, 2020)		Social Security Benefits	\$6,852.00				
Part 2: Liet Corte	in Paymente Ve	Made Refere Vou Filed for	Rankruntov				
Part 3: List Certa	in Payments fou	Made Before You Filed for	Бапкгирісу				
☐ No. <b>Neith</b>	ner Debtor 1's or Debtor 2's debts primarily consumer debts?  Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
Durin	a the 90 days befo	ore you filed for bankruptcy, di	d vou pav any creditor a total	of \$6.825* or more?			
	•		- , - x pa, a, oroanor a total	1. \$5,020 0. Moro.			
	es List below e		nts for domestic support oblig	n one or more payments and tations, such as child support a			
* Sul				or after the date of adjustment	t.		

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Debtor 1 Mona Holland Case number (if known) 22-10566

			re primarily consumer deb I for bankruptcy, did you pa		al of \$600 or mor	e?		
	■ No.	Go to line 7.						
	□ Yes	List below each creditor	or to whom you paid a total domestic support obligations uptcy case.					
	Creditor's Name and	I Address	Dates of payment	Total amount paid	Amount you still owe	•	ayment for	
7.	Insiders include your r of which you are an of	elatives; any general pa ficer, director, person in	cy, did you make a payme rtners; relatives of any gene control, or owner of 20% or 1 U.S.C. § 101. Include pay	eral partners; partners more of their voting	erships of which y g securities; and	you are a generation any managing a	al partner; corporations agent, including one for	
	_	nents to an insider.						
	Insider's Name and		Dates of payment	Total amount paid	Amount you still owe		this payment	
8.	insider? Include payments on o	you filed for bankrupto lebts guaranteed or cos nents to an insider	cy, did you make any payr igned by an insider.	nents or transfer a	any property on	account of a d	ebt that benefited an	
	Insider's Name and	Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name	
Dav	dentify Land	Nationa Democracion	o and Farceleaures	•				
<b>Par</b> 9.	Within 1 year before	ncluding personal injury tract disputes.	ey, were you a party in any cases, small claims actions					
	Case title		Nature of the case	Court or agency		Status of th	Status of the case	
	Ditech Financial,   F-013639-18	LLC v. Holland	Mortgage Foreclosure	Superior Court of New Jersey Essex County - Chancery Division 212 Washington Street 8th Floor Newark, NJ 07102		☐ On appe	■ Pending □ On appeal □ Concluded  Pending Sale	
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	■ No. Go to line 11 □ Yes. Fill in the inf							
	Creditor Name and		Describe the Property		Dat	е	Value of the	
			Explain what happened				property	

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Case number (if known) 22-10566

11.	Within 90 days before you filed for bank	kruptcy,	did any creditor, including a bank or financial in	stitution, set off any a	amounts from your				
	accounts or refuse to make a payment b  ■ No □ Yes. Fill in the details.			•					
	Creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount				
12.		Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
Par		ns							
			did you give any gifts with a total value of more t	han \$600 per person	?				
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value				
	Address:	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No □ Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster				
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending acc claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	t 7: List Certain Payments or Transfer	's							
16.	consulted about seeking bankruptcy or	preparir	d you or anyone else acting on your behalf pay on a bankruptcy petition?  s, or credit counseling agencies for services require		rty to anyone you				
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You MINION & SHERMAN 33 Clinton Road Suite 105 West Caldwell, NJ 07006		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
			\$1,900.00 (\$1,570.00 Fees and \$330.00 Costs)	January, 2020 - March, 2020	\$1,900.00				

Debtor 1 Mona Holland

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Deb	otor 1 Mona Holland		Cas	se number (if k	nown) <b>22-105</b>	66
17.	promised to help you deal with your credit	ors or to make payment			ransfer any pro	operty to anyone who
	■ No ■ Yes. Fill in the details.	ou listed on line 16.				
	Yes. Fill in the details.  Person Who Was Paid  Address	Description and transferred	value of any proper		Date payment or transfer was made	Amount o paymen
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your I Include both outright transfers and transfers minclude gifts and transfers that you have alread No.	business or financial aff nade as security (such as	airs? the granting of a sec			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and property transfer			y property or ceived or debt	Date transfer was made
	Person's relationship to you			para in exem	unge	
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pile No Yes. Fill in the details.		ny property to a self	f-settled trust	or similar dev	ice of which you are a
	Name of trust	Description and	value of the propert	y transferred		Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ir	nstruments. Safe Denosi	it Boxes, and Storac	ne Units		
	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No  Yes. Fill in the details.	cy, were any financial ac	ccounts or instrume	ents held in yo	•	•
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	close move	account was ed, sold, ed, or ferred	Last balance before closing o transfe
	Wells Fargo Bank	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	Febr	uary, 2022	\$2,000.00
21.	Do you now have, or did you have within 1 cash, or other valuables?  No Yes. Fill in the details.	year before you filed fo	r bankruptcy, any sa	afe deposit b	ox or other de	pository for securities,

Who else had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Address (Number, Street, City, State and ZIP Code)

Name of Financial Institution

Do you still

have it?

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Debtor 1 Mona Holland Case number (if known) 22-10566

22.	Have you stored property in a storage unit or pla	ce other than your home within	1 year before you filed for bankruptcy?	
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someor for someone.	ne else owns? Include any prope	erty you borrowed from, are storing for,	or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Information	tion		
For	he purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or le toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub-	r, land, soil, surface water, grour stances, wastes, or material.	ndwater, or other medium, including sta	tutes or
	Site means any location, facility, or property as or to own, operate, or utilize it, including disposal s	_	I law, whether you now own, operate, o	r utilize it or used
	Hazardous material means anything an environn hazardous material, pollutant, contaminant, or si		is waste, hazardous substance, toxic si	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	en they occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liabl	e under or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any r	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	trative proceeding under any en	vironmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Conn	ections to Any Business		
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have a	ny of the following connections to any	business?
	■ A sole proprietor or self-employed in a tr	ade, profession, or other activity	, either full-time or part-time	
	☐ A member of a limited liability company (	, ,	• • •	
Offici	al Form 107 Statement of	Financial Affairs for Individuals Filir	og for Bankruntev	nage

Best Case Bankruptcy

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□ A part □ An off □ An own □ No. None ■ Yes. Che Business Na Address (Number, Street,  Mo's Kitche 55 Whittles East Orang  28. Within 2 years institutions, co ■ No □ Yes. Fill Name Address (Number, Street,  Part 12: Sign Be I have read the ans are true and corres with a bankruptcy 18 U.S.C. §§ 152, 1 /s/ Mona Hollan Mona Holland Signature of Debt Date March 25	1 Mona Holland		Case number (if	known) <b>22-10566</b>
	☐ A partner in a partnership			
	☐ An officer, director, or managing ex	ecutive of a corporation		
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation		
	No. None of the above applies. Go to I	Part 12.		
	Yes. Check all that apply above and fill	in the details below for each business.		
В		Describe the nature of the business	Employer	Identification number
		Name of accountant or bookkeeper	Do not inc	lude Social Security number or ITIN.
		·	Dates bus	iness existed
		Cooking	EIN:	7869
			From-To	2008 - Present
Ac (N	ddress umber, Street, City, State and ZIP Code)	Date Issued		
are true with a b 18 U.S.0	□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12.  ■ Yes. Check all that apply above and fill in the details below for each business. ■ Business Name Address Name of accountant or bookkeeper  ■ Cooking ■ Employer Identification number Do not include Social Security number or ITIN.  □ Dates business existed ■ EIN: 7869 ■ From-To 2008 - Present  ■ No ■ Yes. Fill in the details below.  ■ No ■ Yes. Fill in the details below.  ■ No ■ Yes. Fill in the details below.  ■ Date Issued  ■ Address (Number, Street, City, State and ZIP Code) ■ Date Issued  ■ Address (Number, Street, City, State and ZIP Code) ■ Date Issued  ■ No ■ Yes. Fill in the details below.  ■ Sign Below ■ To add that making a false statement, concealing property, or obtaining money or property by fraud in connection a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  ■ Soc. S. § 152, 1431, 1519, and 3571.  ■ March 25, 2022 ■ Date ■ Da			
		Signature of Debtor 2		
Date	March 25, 2022	Date		
Did you ■ No □ Yes	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fil	ing for Bankru	ptcy (Official Form 107)?
■ No			•	(0)(; 1) [ 110)
⊔ res.	Name of Person . Attach the Bankru	ıpıcy retition rreparer's Notice, Declaration	, ana Signature	(Unicial Form 119).

Fill in this inforr	nation to identify your case:
Debtor 1	Mona Holland
Debtor 2 (Spouse, if filing)	
United States E	Bankruptcy Court for the: District of New Jersey
Case number (if known)	22-10566

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

Check if this is an amended filing

#### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A. lines 2-11. ☐ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 2.014.33 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 you listed on line 3. 5. Net income from operating a business, **Debtor 1** profession, or farm 0.00 \$ Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property **Debtor 1** 0.00 Gross receipts (before all deductions) \$ -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Mona Holland		Case nu	mber ( <i>if know</i>	n) <b>22-1056</b> 6	<b>3</b>	
			Column Debtor	1	Column B Debtor 2 non-filing	or	
7. <b>Int</b>	erest, dividends, and royalties		\$	0.0	<u> </u>		
8. <b>Un</b>	nemployment compensation		\$	0.0	\$		
	not enter the amount if you contend that the amount received was a benefit e Social Security Act. Instead, list it here:	under					
	For you \$ <b>0.0</b>	0					
	For your spouse \$						
9. <b>Pe</b> bei not Un dis pay	ension or retirement income. Do not include any amount received that was nefit under the Social Security Act. Also, except as stated in the next sentent include any compensation, pension, pay, annuity, or allowance paid by the little States Government in connection with a disability, combat-related injury sability, or death of a member of the uniformed services. If you received any y paid under chapter 61 of title 10, then include that pay only to the extent the senot exceed the amount of retired pay to which you would otherwise be entired under any provision of title 10 other than chapter 61 of that title.	ce, do	\$	0.00	<b>0</b> \$_		
Do und col cril col Go dei	come from all other sources not listed above. Specify the source and ame not include any benefits received under the Social Security Act; payments a der the Federal law relating to the national emergency declared by the Presider the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the ronavirus disease 2019 (COVID-19); payments received as a victim of a warme, a crime against humanity, or international or domestic terrorism; or mpensation, pension, pay, annuity, or allowance paid by the United States overnment in connection with a disability, combat-related injury or disability, ath of a member of the uniformed services. If necessary, list other sources of parate page and put the total below.	made dent ne					
	Food Stamps		\$	405.00	<b>o</b> \$		
	Suuport From ex-Husband		\$	140.00	\$		
	Total amounts from separate pages, if any.	_ +	\$	0.0	\$		
	Iculate your total average monthly income. Add lines 2 through 10 for ch column. Then add the total for Column A to the total for Column B.  Determine How to Measure Your Deductions from Income	\$	2,559.33	<b>3</b> + \$			2,559.33 al average nthly income
12 <b>Co</b>	ppy your total average monthly income from line 11.					\$	2,559.33
	Ilculate the marital adjustment. Check one:					Ψ	2,339.33
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
_	Fill in the amount of the income listed in line 11, Column B, that was NOT dependents, such as payment of the spouse's tax liability or the spouse's Below, specify the basis for excluding this income and the amount of incoadjustments on a separate page.	suppo	rt of some	one other	than you or you	ur depende	ents.
	If this adjustment does not apply, enter 0 below.						
		\$					
		\$					
		+\$					
	Total	\$	(	0.00	Copy here=>		0.00
14. <b>Y</b>	our current monthly income. Subtract line 13 from line 12.					\$	2,559.33
15. <b>C</b>	calculate your current monthly income for the year. Follow these steps:						
1:	5a. Copy line 14 here=>					\$	2,559.33

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Debtor 1	Mona Holland	Case number (if known)	22-10566	
	Multiply line 15a by 12 (the number of months in a year).		x 12	2
15	o. The result is your current monthly income for the year for this pa	ırt of the form	\$\$	0,711.96

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debte	or 1	Mon	a Holland		Case number (if known)	22-10566		
16	Calc	culate	the median family income that applies to y	<b>ou.</b> Follow these	e stens:			
			the state in which you live.	NJ				
			,		<u> </u>			
	16b	. Fill in	the number of people in your household.	2				
	16c.	To fir	the median family income for your state and a list of applicable median income amounts	, go online using	the link specified in the separate		\$	88,511.00
17	. Hov		ctions for this form. This list may also be avaine lines compare?	iable at the bank	ruptcy cierk's office.			
	17a	_	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N		•			
	17b	. 🗆	- ,,,,	of page 1 of this	form, check box 2, Disposable incom	ne is determine	ed un	der 11 U.S.C. §
Par	t 3:	Ca	culate Your Commitment Period Under 11	U.S.C. § 1325(b)	)(4)			
18.	Cop	y you	r total average monthly income from line 1	1.		\$		2,559.33
19.	cont	tend th	ne marital adjustment if it applies. If you are not calculating the commitment period under 1 ncome, copy the amount from line 13.	married, your sp	pouse is not filing with you, and you	_		
	•		marital adjustment does not apply, fill in 0 on	line 19a.		<b>-</b> \$_		0.00
	19b	Subt	ract line 19a from line 18.				\$	2,559.33
20.	Cal	culate	your current monthly income for the year.	Follow these ste	eps:			
	20a	. Сору	line 19b				\$	2,559.33
		Multi	ply by 12 (the number of months in a year).				X	12
	20b	. The r	result is your current monthly income for the y	ear for this part o	of the form		\$	30,711.96
	20c.	Сору	the median family income for your state and	size of househol	d from line 16c		\$	88,511.00
	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the	e court, on the top of page 1 of this fo	orm, check box	x 3, <i>T</i>	he commitment
			Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	less otherwise o	rdered by the court, on the top of page	ge 1 of this for	m, ch	eck box 4, The
Part	t <b>4</b> :	Sio	ın Below					
			here, under penalty of perjury I declare that t	he information or	n this statement and in any attachme	ents is true and	corre	ect.
	/ lel	Mon	a Holland					
•			olland					
	•	•	e of Debtor 1					
	Date		rch 25, 2022 / DD / YYYY					
	If yo		cked 17a, do NOT fill out or file Form 122C-2.					
	If yo	u che	cked 17b, fill out Form 122C-2 and file it with t	his form. On line	39 of that form, copy your current m	onthly income	from	line 14 above.

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Fill in this info	ormation to identify your case:	
Debtor 1	Mona Holland	_
Debtor 2 (Spouse, if filin	g)	-
United States E	Bankruptcy Court for the: District of New Jersey	
Case number (if known)	22-10566	■ Check if this is an amended filing

Official Form 122C-2

#### **Chapter 13 Calculation of Your Disposable Income**

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,292.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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**Mona Holland** 22-10566 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 136.00 Copy here=> 136.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 142 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 136.00 136.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 688.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,448.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment NewRez LLC d/b/a Shellpoint Mortgage 2,129.00 Сору Repeat this amount 2,129.00 2.129.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 319.00 319.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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ebtor 1	Mona Holland		Case number (if known)	22-10566	
11.	Local transportation expenses: Check the number of vehic	cles for which you claim a	an ownership or op	erating expense.	
	☐ 0. Go to line 14.				
	■ 1. Go to line 12.				
	2 or more. Go to line 12.				
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for the standards operating expenses.				5.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.				
Vel	Describe Vehicle 1:				
13a.	Ownership or leasing costs using IRS Local Standard		\$	0.00	
13b.	Average monthly payment for all debts secured by Vehicle 1.				
	Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.		i		
	Name of each creditor for Vehicle 1	Average monthly payment			
	-NONE-	\$			
			٦		
	Total Average Monthly Payment	\$	Copy here => -\$	<b>0.00</b> Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense			Copy net	
	Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	\$ 0	Vehicle 1 expense here	0.00
			<b>5</b>	=> \$	0.00
Vel	nicle 2 Describe Vehicle 2:				
13d.	Ownership or leasing costs using IRS Local Standard		\$ 0	0.00	
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	. Do not include costs for			
	Name of each creditor for Vehicle 2	Average monthly payment			
		\$			
	Total average monthly payment	\$	Copy here => -\$	Repeat this amount on line 33c.	
13f	Net Vehicle 2 ownership or lease expense			Copy net	
101.	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0		Vehicle 2 expense here	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v			s, fill in the	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in what claim more than the IPS Local Standard for Public Transport	hat you believe is the ap		but you may	0.00

Debtor 1

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Debtor 1 Mona Holland Case number (if known) 22-10566

		n addition to the expense d ne following IRS categories		listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, socia	I security taxes, and Medic vever, if you expect to rece in the total monthly amount	are taxes. ive a tax r	You may inc efund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from the taxes are the expected refund by 12 for taxes.	\$	0.00
17.	<b>Involuntary deductions:</b> The contributions, union dues, and		uctions tha	at your job re	quires, such as retirement		
			o, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payme	nts that you make for your life insurance on your depe	spouse's	term life insu	e insurance. If two married people are trance. I spouse's life insurance, or for any form	\$	0.00
19.	<b>Court-ordered payments:</b> T administrative agency, such a Do not include payments on p	as spousal or child support	payments	s. ·	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly	amount that you pay for e	ducation t	that is either i	required:		
	as a condition for your job	, or					
	for your physically or men	tally challenged dependent	child if no	public educ	ation is available for similar services.	\$	0.00
21.	<b>Childcare:</b> The total monthly Do not include payments for a			-	sitting, daycare, nursery, and preschool.	\$	0.00
22.		and welfare of you or your Include only the amount th	depender at is more	nts and that is than the tota		\$	0.00
23.	Optional telephone and tele for you and your dependents, phone service, to the extent r income, if it is not reimbursed Do not include payments for l	ephone services: The total such as pagers, call waiting the ecessary for your health a by your employer. Doasic home telephone, interest.	I monthly ng, caller i nd welfare rnet and c	amount that y dentification, e or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed Add lines 6 through 23.	wed under the IRS expe	nse allow	ances.		\$	2,790.00
		These are additional di Note: Do not include a	eductions	allowed by th		\$	2,790.00
Add	Add lines 6 through 23.  itional Expense Deductions  Health insurance, disability	These are additional de Note: Do not include a insurance, and health sa	eductions ny expens avings ac	allowed by the allowances			2,790.00
Add	Add lines 6 through 23.  itional Expense Deductions  Health insurance, disability insurance, disability insurance.	These are additional de Note: Do not include a insurance, and health sa	eductions ny expens avings ac	allowed by the allowances	s listed in lines 6-24.  ses. The monthly expenses for health		2,790.00
Add	Add lines 6 through 23. litional Expense Deductions  Health insurance, disability insurance, disability insurance, your dependents.	These are additional de Note: Do not include a insurance, and health sa	eductions ny expens avings ac unts that a	allowed by the allowances count expendance reasonab	s listed in lines 6-24.  ses. The monthly expenses for health		2,790.00
Add	Add lines 6 through 23.  itional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance	These are additional de Note: Do not include a insurance, and health sae, and health savings acco	eductions ny expens avings ac- unts that a	allowed by the allowances count expenser reasonab	s listed in lines 6-24.  ses. The monthly expenses for health		2,790.00
Add	Add lines 6 through 23.  litional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance	These are additional de Note: Do not include a insurance, and health sae, and health savings acco	eductions ny expens avings ac unts that a	allowed by the allowances count expenser reasonab  0.00  0.00	s listed in lines 6-24.  ses. The monthly expenses for health		2,790.00
Add	Add lines 6 through 23.  litional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to	These are additional di Note: Do not include ai insurance, and health sa e, and health savings acco	eductions ny expens avings ac unts that a	allowed by the allowances count expensare reasonab  0.00  0.00  0.00	s listed in lines 6-24.  Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
Add	Add lines 6 through 23.  litional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to	These are additional di Note: Do not include ai insurance, and health sa e, and health savings acco	eductions ny expens avings ac unts that a	allowed by the allowances count expensare reasonab  0.00  0.00  0.00	s listed in lines 6-24.  Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
Add	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you Yes  Continued contributions to continue to pay for the reason	These are additional di Note: Do not include al insurance, and health sa e, and health savings acco tal amount? a actually spend?  the care of household on hable and necessary care a f your immediate family wh	syings accurate that a	allowed by the eallowances count expensare reasonab  0.00  0.00  0.00  0.00  embers. The out of an elder et to pay for s	c actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may	r	
25.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you Yes  Continued contributions to continue to pay for the reason your household or member of include contributions to an actually view of the reason your household or member of include contributions to an actual Protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of include contributions to an actual protection against family view of the reason your household or member of the reason your household or member of the reason your household or member of the reason your household or	These are additional di Note: Do not include a  insurance, and health sa e, and health savings acco  tal amount?  actually spend?  the care of household on hable and necessary care a if your immediate family wh count of a qualified ABLE is olence. The reasonably ne	s s s s s s s s s s s s s s s s s s s	allowed by the allowances count expensare reasonab  0.00 0.00 0.00 0.00  0.00  embers. The ort of an elder e to pay for see to	c actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may	r\$	0.00

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ebtor 1	Mona Holland		Case number (if kr	nown)	22-1	0566		
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insural	nce and opera	iting	expense	s on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en		costs included	in ex	penses	on line		
	You must give your case trustee document amount claimed is reasonable and necessa		st show that th	ne ad	lditional		\$	0.00
;	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The montle pendent children who are younger than 18	hly expenses ( Byears old to a	(not r atten	more tha d a priva	n te or		
,	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	st explain why	the	amount			
,	* Subject to adjustment on 4/01/22, and ev	ery 3 years after that for cases begun on or	r after the date	of a	djustme	nt.	\$	0.00
!	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS National Standards						
	To find a chart showing the maximum additinstructions for this form. This chart may also			sepa	rate			
,	You must show that the additional amount	claimed is reasonable and necessary.					\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organical contributions.		e in the form o	f cas	sh or fina	ncial		
ا	Do not include any amount more than 15%	of your gross monthly income.					\$	0.00
	Add all of the additional expense deduc Add lines 25 through 31.	ions.					\$_	0.00
Dedu	ictions for Debt Payment							
	or debts that are secured by an interest pans, and other secured debt, fill in lines		ne mortgages	, vel	nicle			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba		due to each s	ecur	ed			
	Mortgages on your home						Avera	age monthly
33a.	Copy line 9b here					=>	\$	2,129.00
	Loans on your first two vehicles						· —	
33b.						=>	\$	0.00
							Φ	
33c.	Copy line 13e nere					=>	<b>Ф</b>	0.00
33d. Name	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt		incl	es payme ude taxe	s		
					No			
	-NONE-				Yes		\$	
					No			
				Ч	Yes		\$	
					No			
					Yes	+	\$	
						Copy		
33e	Total average monthly payment. Add lines	33a through 33d	\$	2,12	9.00	total here=	<b>&gt;</b>   \$ _	2,129.00

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btor 1	Mon	a Holland			Cas	se nı	umber (if known) 22	2-10566		
			ne 33 secured by your prin			е,				
	l No.	Go to line 35.								
	Yes.	,	u must pay to a creditor, in a ossession of your property (in the information below.							
Name	e of the	creditor	Identify property that secu	ires the c	debt	To	tal cure amount		Monthly	
	/Rez I tgage	LC d/b/a Shellpoint	55 Whittlesey Avenu				379,843.53		}	6,330.73
					\$	_		$\div 60 = \$$ $\div 60 = +3$		
						_		Copy		
					Total	\$	6,330.73	total	=> \$	6,330.73
								_		
		ongoing priority claims, su	all of these priority claims. Duch as those you listed in line	e 19.						
		Total amount of all past-					0.00	)_ ÷60	) \$_	0.00
36. <b>P</b> r	ojecte	d monthly Chapter 13 pla	n payment			\$		_		
Of the To	ffice of e Exec find a l	the United States Courts (futive Office for United State ist of district multipliers that incl	stated on the list issued by to districts in Alabama and Nes Trustees (for all other distludes your district, go online using may also be available at the b	North Ca ricts). ng the link	rolina) or by	X .				
							•	Copy to here=>		
ΑV	verage	monthly administrative exp	erise				\$	ileie->	Ψ —	
07 /	الملماما	of the deductions for del	at maximant						\$	8,459.73
		of the deductions for deless 33e through 36.	or payment.						_	
Total	Deduc	ctions from Income								
38. <b>A</b> o	dd all d	of the allowed deductions								
		ne 24, All of the expenses a e allowances	allowed under IRS	\$_	2,790.00	0				
C	Copy lir		expense deductions	\$_	0.00	0_				
C	Сору liı	ne 37, All of the deductions	for debt payment	+\$_	8,459.73	3_	_			
_	F-4-1 :	- doort		_	44 040 7	,			•	11 040 70
ı	otal de	eductions		\$_	11,249.73	<b>)</b>	Copy total here=	>	\$	11,249.73

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Debtor 1 _	Mona Holland			_	Case nu	mber ( <i>if known</i> ) _	22-10566	
Part 2:	Determine You	ır Disposable Income Under 11	U.S.C. § 1325(	b)(2)				
		rent monthly income from line Current Monthly Income and Ca			od.		\$	2,559.33
<b>chil</b> disa rece	dren. The monthle bility payments for eived in accordance.	ly necessary income you receily average of any child support por a dependent child, reported ince with applicable nonbankruptcy anded for such child.	ayments, foster Part I of Form 12	care payments, o 22C-1, that you		\$	0.00	
emp in 1	oloyer withheld fro	etirement deductions. The mon m wages as contributions for qual (7) plus all required repayments . § 362(b)(19).	alified retiremen	t plans, as specifi	;	\$	0.00	
42. <b>Tot</b> a	al of all deductio	ns allowed under 11 U.S.C. § 7	<b>07(b)(2)(A).</b> Co <sub>l</sub>	py line 38 here	=>	\$11,2	49.73	
expe thei	enses and you ha r expenses. You r	al circumstances. If special circumstances. If special circumster no reasonable alternative, demust give your case trustee a defocumentation for the expenses.	scribe the speci	al circumstances	and			
Describ	e the special cir	cumstances		Amount of ex	pense			
_				\$		_		
_				\$		_		
-				\$		_		
			Total \$	0.00		opy ere=> \$	0.00	
44. <b>Tot</b> a	al adjustments. /	Add lines 40 through 43.		=>	\$_	11,249.73	Copy here=> -	11,249.73
45. <b>Cal</b>	- -	thly disposable income under	<b>§ 1325(b)(2).</b> Su	ubtract line 44 fro	m line	39.	\$	-8,690.40
have time you	e changed or are e your case will be filed your petition	or expenses. If the income in For virtually certain to change after t e open, fill in the information belo n, check 122C-1 in the first colum in when the increase occurred, a	he date you filed w. For example, n, enter line 2 in	d your bankruptcy if the wages report the second colu	petitic prted ir nn, ex	on and during th ncreased after	ne	
Form	Line	Reason for change		Date of char	ge	Increase or decrease?	Amount	of change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	-2 -1 -2 -1 -1					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$ \$	

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Debtor 1	Mona Holland	Case number (if known)	22-10566
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you	declare that the information on this statement and in any at	achments is true and correct.
	/s/ Mona Holland		
	Mona Holland Signature of Debtor 1		
	March 25, 2022 MM / DD / YYYY		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 22-10566-VFP Doc 22 Filed 03/25/22 Entered 03/25/22 13:45:51 Desc Main Document Page 56 of 60 UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Scott D. Sherman 33 Clinton Road Suite 105 West Caldwell, NJ 07006 (973) 882-2424 ssherman@minionsherman.com **Mona Holland** In Re: 22-10566 Case No.: Chapter: 13 Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: ■ Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 4,750.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: adversary proceedings. loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: \$ 1,570.00 The balance due is: \$ 3,180.00 The balance  $\square$  will  $\blacksquare$  will not be paid through the plan. □ Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ . The hourly fee charged by other members of my firm that may provide services to this client range from \$ to \$ . I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1. I have received: \$ 2. The source of the funds paid to me was: ■ Debtor(s) □ Other (specify below)

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3.	If a balance is due, the source of future compensation to be paid to me is:						
	■ Debtor(s)	☐ Other (specify below)					
agreen 5.	f I have agreed to share comp nent and a list of the people sl (a) The Debtor(s) agree that	eed to share compensation with another person(s) unless they are members of my law ensation with a person(s) who is not a member of my law firm, a copy of that naring in the compensation is attached.  coverage counsel may appear at hearings on their behalf in lieu of counsel retained by btor's counsel will advise Debtor(s) of the use of coverage counsel for any hearings					
•	o that hearing. Debtor(s) ackn npensated for their appearance	owledge that coverage counsel may not be a member of my firm and may or may not e.					
	Debtor	Debtor(s) Initials					
		agree that coverage counsel may appear at hearings on their behalf in lieu of counsel appearances related to the Debtor(s) matter will be made by me, the undersigned n.					
	/s/ M H						
	Debtor	r(s) Initials Debtor(s) Initials					
6.	The Debtor(s) have reviewe	d this Disclosure and it is consistent with the terms of the Retainer Agreement.					
Date:	March 25, 2022	/s/ Mona Holland					
		Mona Holland					
		Debtor					
Date:							
		Joint Debtor					
Date:	March 25, 2022	/s/ Scott D. Sherman					
	·	Scott D. Sherman					
		Debtor's Attorney					

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# **United States Bankruptcy Court**District of New Jersey

In re	Mona Holland	Case No.	22-10566
	Debtor(s)	Chapter	13

	VERIFICAT	ON OF CREDITOR MATRIX - AMENDED				
The abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and correct to the best of his/her knowledge.				
Date:	March 25, 2022	/s/ Mona Holland  Mona Holland				
		Signature of Debtor				

Affinity Fcu 73 Mountainview Blvd Bld Basking Ridge, NJ 07920

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Credit Collection Services Attn: Bankruptcy 725 Canton St Norwood, MA 02062

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Discover Financial Po Box 3025 New Albany, OH 43054

Ditech Financial LLC PO Box 6172 Rapid City, SD 57709-6172

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NewRez LLC d/b/a Shellpoint Mortgage PO Box 10826 Greenville, SC 29603-0826

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